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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/835,063	04/16/2001	Focke Rass	225/49847	3891
7590	02/06/2008		EXAMINER	
Crowell & Moring LLP Intellectual Property Group P. O. Box 14300 Washington, DC 20044-4300			ESTREMSKY, GARY WAYNE	
			ART UNIT	PAPER NUMBER
			3673	
			MAIL DATE	DELIVERY MODE
			02/06/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

**UNITED STATES PATENT AND TRADEMARK OFFICE**

Board of Patent Appeals and Interferences

Crowell & Moring LLP
Intellectual Property Group
P. O. Box 14300
Washington, DC 20044-4300

Appeal No: 2007-2017
Appellant: Focke Rass et al.
Application No: 09/835,063
Hearing Room: A
Hearing Docket: B
Hearing Date: Thursday, March 13, 2008
Hearing Time: 01:00 PM
Location: Madison Building - East Wing
600 Dulany Street, 9th Floor
Alexandria, Virginia 22313-1450

NOTICE OF HEARING
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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CHECK ONE: **HEARING ATTENDANCE CONFIRMED** **HEARING ATTENDANCE WAIVED**

Signature of Attorney/Agent/Appellant

Date _____

Registration No. _____

Names of other visitors expected to accompany counsel: _____

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